- 4. In menopausal symptoms to hasten menopause.
- 5. In endometriosis.
- C. Methods employed:
 - 1. X-Ray.
 - 2. Radium.
- D. Effectiveness of irradiation depends on:
 - Age—The younger, the less permanent the sterilization.
 - 2. Intensity.
 - 3. Physical characteristics.
- E. Complications and Sequelae.

When properly employed irradiation sterilization is of equal worth and effectiveness with surgery without its associated mortality and morbidity.

5. STERILIZATION FROM THE STANDPOINT OF THE INTERNIST JOHN WYCKOFF

The interest of the internist in the subject of sterilization is concerned principally with the effect of pregnancy on chronic disease.

Successful pregnancies have been reported in chronic leukemia. Anemia of the Addisonian type can be treated. Congenital haemophilia presents a problem due to transmission.

Hyperthyroidism is exaggerated by pregnancy. Diabetes is no contra-indication. Maladies of the digestive tract offer little indication.

Renal disease and hypertension are considered from: 1) influence of pregnancy on glomerulonephritis and essential hypertension: 2) influence on pregnancy of glomerulonephritis, essential hypertension and previous toxemia. Active glomerulonephritis is a contra-indication to pregnancy, especially when renal function is impaired.

Uncomplicated essential hypertension is rarely a contraindication to pregnancy, unless complicated by retinal hemorrhage and when before pregnancy the diastolic pressure is high. Myocardial involvement due to coronary disease or previous cerebral accident are contra-indications. The history of more than one previous toxemia is a contraindication.

Heart diseases in pregnancy are mostly of the rheumatic type. Patients with good cardiac reserve do well. Patients with markedly diminished reserve should not become pregnant.

Patients with active tuberculosis are made very much worse by pregnancy.

The physician who advises permanent sterilization takes a serious responsibility. The indications are: 1) Hereditary taint, such as haemophilia; 2) chronic disease in which pregnancy or the additional burdens subsequent to child-bearing have serious deleterious effects upon either mother or child, or both, and in which there is practical certainty that the disease itself is either progressive or that it will never improve.

6. STERILIZATION FROM THE STANDPOINT OF THE NEURO-PSYCHIATRIST FORTER KENNEDY

Critical analysis of evolutionary development should be made, to presage any conclusions as to the point of view of the neuro-psychiatrist as to decisions on the subject of Sterilization.

Though manic depressive states are somewhat hereditary, history has nevertheless shown that many have contributed to civilization, by ideas, talents and achievements emanating from their brilliant minds.

Compulsory sterilization for conditions, such as schizophrenia and manic depressive, performed without anyone, as yet, having knowledge of its pathology, and therefore the uncertainty of what to-morrow might bring forth in the way of prognosis, makes this procedure highly questionable as to its righteousness.

Sterilization of the criminally insane is considered desirable.

Sterilization of the feebleminded, 90 per cent showing hereditary influences, is thought desirable, in fact those at